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## APPLICANTS

John C. Lallier, Massapequa Park, NY;

\*\* CONTINUING DATA \*\*\*\*\* None, *NYH*\*\* FOREIGN APPLICATIONS \*\*\*\*\* None, *NYH*IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
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\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 66	<b>INDEPENDENT CLAIMS</b> 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

ADDRESS  
000041881

## TITLE

System and method for file migration

<b>FILING FEE RECEIVED</b> 1079	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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